VA-3 - VARIABLE ANNUITY  This is to certify that the producers listed below hold a current life appointment to represent the insurance company named below. It is further certified that the insurance company named below hereby appoints the producers listed below as variable annuity producers to represent said company for the license year: May 1, 2004 - April 30, 2005.													
C		v Numb or											
		y Number											
C	ompan	y Name and Address	:					COMMISSIONER OF IN					
_								STATE OF LOUIS					
								P. O. BOX 942 BATON ROUGE, LOUISIAN					
_						DATON ROUGE, ECOIDIANA 10007-7217							
_													
						☐ CHECK THIS BOX IF THIS COMPANY APPOINTMENT IS FOR AN INSURER APPLYING TO BECOME ADMITTED IN THIS STATE.							
-							ANIN	SURER APPLYING TO BECOME A	ADMITTED IN T	HIS STATE.			
	Disappr	roved Code (DOI Use)	Limite	d Code			Pro	oducer Name		Resident	Fee		
		, ,								State			
	$\downarrow \downarrow$	License Number	$\Downarrow$	EIN or	Social Security N <sup>0</sup>	Last		First	Middle				
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Original Signature of Authorized Representat					nature of Authorized Re	presentative		Date					
Fiscal Division Only Produ					Proi	OUCER Licensing Only		FOR DEPARTMENT OF INSURANCE USE ONLY					
								Classification					
							Postmark Date						
							Date Processed						
								Initials	+				

## INSTRUCTIONS FOR APPOINTING ALL TYPES OF PRODUCERS

- 1. When an appointment form is submitted to our department a copy of the <u>disapproved</u> appointments will be returned to your company. **Please enclose a self-addressed, stamped envelope**. (Please make a copy for your records prior to submitting your appointment to our office.)
- 2. Louisiana no longer sends confirmation of approved appointments. Please check our website at www.ldi.state.la.us. It is updated daily
- 3. All insurer information must be completed including the company number.
- 4. **Fees are not refundable**. A new form and fee must be submitted if the appointment is disapproved.
- 5. The name listed on the appointment form must be exactly as it appears on the Louisiana license. List last name first in alphabetical order. Do not use abbreviations or nicknames. INCOMPLETE NAMES WILL BE DISAPPROVED.
- 6. When appointing a partnership or corporation, list the name of the partnership or corporation. It is not necessary to appoint each partner, officer or employee registered with the firm, in their individual name.
- 7. A \$10 penalty fee will be charged for each name listed on the <u>renewal appointment</u> form if received after March 1.
- 8. Checks must be made payable to the Louisiana Department of Insurance.

**Notice:** The Louisiana Department of Insurance may convert your payments by check to an electronic Automated Clearinghouse (ACH) debit transaction. This means that your account may be debited the day your check is received by the Louisiana Department of Insurance. Although the debit transaction will appear on your bank statement, your check will not be returned to your bank. If the electronic fund transfer cannot be processed for technical reasons, you authorize us to process the copy of your check.

	Life, Heath and Accident Appointments (1117B)		Property and Casualty Producer Appointments (1170)		
	ish to limit a producer to the lines of insurance listed below, please the limited code in the corresponding column on Form 1117B.	If you wish to limit a producer to the lines of insurance listed below, please indicate the limited code in the corresponding column on Form 1170.			
1.	Limited to Credit Life	5.	Limited to Industrial Fire		
2.	Limited to Credit Health and Accident	6.	Limited to Fidelity and Surety		
3.	Limited to Credit Life and Credit Health and Accident	7.	Limited to Baggage		
4.	Limited to Travel Health and Accident	8.	Producer will write Bail Bonds		
		9.	Limited to Vehicle Property Damage		
		10.	Limited to Credit Property		
FEES:	\$20.00 per producer	FEES:	\$20.00 per producer		
	Automobile Club Producers (AC-3)		Variable Annuity Appointments (VA-3)		
			licant must hold a current Life Appointment with the appointing		
		Insuranc	e Company.		
FEES:	\$20.00 per producer	FEES:	\$20.00 per producer		

	DISAPPROVED CODES						
A	Producer did not renew his/her license	J	Deceased Individual				
В	Producer holds a limited license and is not qualified to transact lines of insurance authorized by your company's certificate of authority	K	Revoked License				
C	Invalid license number or name and number do not match	L	Suspended License				
D	Insufficient Fees – must resubmit with new fees	M	License Cancelled				
Е	Duplicate Appointment	N	Moved out of state				
F	Producer is not licensed	О	Need letter of certification indicating lines of insurance for which the producer is licensed				
G	Producer has a complaint on file	P	Producer does NOT hold a current life appointment to represent the insurance company				
Н	Producer has a non-sufficient fund check on file (company appointment form may be resubmitted when check is clear)	Q	Invalid company number or company name and number do not match				
I	Invalid address and/or Fine imposed	R	See REMARKS at bottom of form OR see letter attached to appointment form				